



Working Well NJ

Fitness Challenge Program

Your Road to Health and Fitness
Exercise Log Book



To Learn More About *Working Well NJ*
Visit: www.nj.gov/personnel
and click on the *Working Well NJ* logo



Welcome to the
Working Well NJ
Fitness Challenge.

If you're a new participant in an exercise program,
check with your doctor before you begin.

Build up your distance/exercise time slowly.

Make exercising a part of every day and see and feel the results!



Working Well New Jersey is a statewide wellness initiative with the goal of providing government employees across the State with the knowledge, resources and incentives to improve the quality of their lives at home and in the workplace.

By engaging in regular physical activity, making healthy living choices and getting regular medical checkups, we can set the standard for all of New Jersey.

***Live Long, Live Well Exercise Tips**

- Check with your doctor before starting this or any fitness program.
- Stay physically active for good health and to maintain healthy bones, muscles and joints.
- Add more movement to all of your daily activities to increase your health benefits – take the stairs instead of an elevator, or park your car at the far end of the parking lot.
- Drink water before, during and after your exercise activity.
- To warm up at the beginning of your walk and/or exercise activity, start slowly and gradually increase your speed and/or activity.
- After you exercise, stretch to keep limber, improve balance and prevent injuries.
- Take full, relaxed breaths through nose or mouth and exhale gradually and completely.

- Find a friend or co-worker to walk or exercise with you.
- Choose a convenient time of day and stick with it – find a time that best fits your schedule.
- Always carry identification and enough loose change to make a phone call.
- If walking/running or jogging, select a safe route that is relatively flat and smooth and avoids traffic.
- Wear socks and shoes that are recommended for walking, running or jogging.
- Keep your head high, shoulders back, stomach in, and back straight as you take comfortable, relaxed steps.
- If you get a muscle pain or cramp, stop walking and/or exercising. Relax the affected muscle, massage it gently and stretch it. Proceed at a slower pace.
- If you can't talk easily while walking, slow your pace.

- Join or start a walking club– check with your office, local church, YMCA, YWCA, local mall, co-workers or friends and family to see if they want to join with you.
- Set reasonable ‘do-able’ goals for time or distance.
- Meet the *Working Well NJ* challenge: Work up to 30 minutes of regular physical activity on most or all days of the week.
- Log your information in your exercise logbook each time you walk or are physically active.
- To receive your ***Working Well NJ* Fitness Challenge Recognition Certificate**, fill out the information on the last page of your log and forward it to your department/agency contact.
- **Celebrate your success!**

For best results, get your heart rate up to the target zone indicated below. Use the age category closest to your age for your target zone.

<u>Age</u>	<u>Heart Rate Target Zone</u>
20 years	100–150 beats per minute
25 years	98–146 beats per minute
30 years	95–142 beats per minute
35 years	93–138 beats per minute
40 years	90–135 beats per minute
45 years	88–131 beats per minute
50 years	85–127 beats per minute
55 years	83–123 beats per minute
60 years	80–120 beats per minute
65 years	78–116 beats per minute
70 years	75–113 beats per minute

After exercising, place the tips of your first two fingers on the inside of your wrist, just below the bottom of your thumb. Count your pulse for 10 seconds; multiply that number by 6 for the number of beats per minute.

If below your target zone, walk a little faster next time; slow down if you are above your target zone.

Week 1				Week 2			
Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken	Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken
Sunday				Sunday			
Monday				Monday			
Tuesday				Tuesday			
Wednesday				Wednesday			
Thursday				Thursday			
Friday				Friday			
Saturday				Saturday			
Weekly Totals				Weekly Totals			

*If you are using a pedometer to track your daily activity, enter your steps instead of the distance walked.

Week 3				Week 4			
Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken	Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken
Sunday				Sunday			
Monday				Monday			
Tuesday				Tuesday			
Wednesday				Wednesday			
Thursday				Thursday			
Friday				Friday			
Saturday				Saturday			
Weekly Totals				Weekly Totals			

*If you are using a pedometer to track your daily activity, enter your steps instead of the distance walked.

Week 5				Week 6			
Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken	Date	Type of Physical Activity	Minutes Exercised	Distance and/or Steps* Taken
Sunday				Sunday			
Monday				Monday			
Tuesday				Tuesday			
Wednesday				Wednesday			
Thursday				Thursday			
Friday				Friday			
Saturday				Saturday			
Weekly Totals				Weekly Totals			

*If you are using a pedometer to track your daily activity, enter your steps instead of the distance walked.



Congratulations! Fill out the information below and forward to your department/agency Wellness Coordinator to receive your *Working Well NJ Fitness Challenge Recognition Certificate*.

☐ Yes, I participated in the Fitness Challenge for 6 weeks.

For the six week challenge, my total minutes exercised: _____

I increased my regular physical activity because of this program: ☐ Yes ☐ No

Name _____

Work Address _____

City _____

State _____

Zip Code _____

Comments: _____



Congratulations on taking steps to improve your health!

Join *Working Well NJ* and Exercise

- Get More Energy
- Feel Better
- Tone Your Muscles
- Sleep Better
- Reduce Stress
- Help Control Your Appetite

... For Your Health

NJ Department of Health and Senior Services

www.state.nj.us/health

NJ Department of Personnel

www.nj.gov/personnel

